

07 FEB 2006

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/5410057

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND. DEP.		IND.	DEP.	IND.	DEP.
	1	/	/			
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40			/			
41		2	/			
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48						
49						
50						
TOTAL IND.	4		3			
TOTAL DEP.	43	↔	40	↔		
TOTAL CLAIMS	47	[QR]	43	[QR]		

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND. DEP.		IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.		↔				
TOTAL CLAIMS		[QR]		[QR]		